

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	ER	102	4/3
RESPONSE FORMALITY REVIEW	MD	36917	5-22-07
			07/10/01

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
= ..... Allowed                      I ..... Interference  
- (Through numeral).... Cancelled                      A ..... Appeal  
÷ ..... Restricted                      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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